



03500.014035.

PATENT APPLICATION

\$2178
41

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: M. J. Ludwig
TAKAFUMI MIZUNO)
: Group Art Unit: 2178
Appln. No.: 09/449,706)
: Filed: November 24, 1999)
: For: DOCUMENT TYPE DEFINITION)
: GENERATING METHOD AND)
: APPARATUS, AND STORAGE)
: MEDIUM FOR STORING)
: PROGRAM) July 20, 2004

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Technology Center 2100

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of a April 20, 2004, please amend the above-identified application as follows. Amendments to the claims are reflected in the listing beginning on page 2, and the Remarks begin on page 14.

07/27/2004 KBETEM1 00000021 09449706

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72.00 OP

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 20, 2004
(Date of Deposit)

Frank A. DeLucia Reg. No. 42,476
(Name of Attorney for Applicant)

Signature

July 20, 2004
Date of Signature

In re Application of:

TAKAFUMI MIZUNO

Application No.: 09/449,706

Filed: November 24, 1999

For: DOCUMENT TYPE DEFINITION GENERATING
METHOD AND APPARATUS, AND STORAGE
MEDIUM FOR STORING PROGRAM

Docket No. 03500.014035.

Examiner: M. J. Ludwig

Group Art Unit: 2178

Date: July 20, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 27	MINUS	** 23	= 4	x \$9 \$18	\$72.00
INDEP. CLAIMS	* 7	MINUS	*** 7	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$72.00

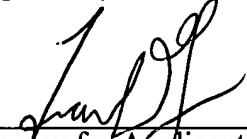
* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 72.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant
Frank A. DeLuca
Registration No.: 42,476

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200